COUNTY COUNCIL – 17 JULY 2012
WRITTEN QUESTIONS UNDER COUNCIL PROCEDURE RULE 9.2

Question from Councillor T Sadiq to the Cabinet Member for Growth and Planning, Councillor I Bates

Could the Cabinet member for Growth and Planning please set out in detail what plans the Council has for consultation on the design of the new Science Park train station at Chesterton and how it plans to engage local residents, passengers, bus and taxi operators, cyclists, motorists, local businesses and other stakeholders on all aspects of the design and access arrangements?

Response from the Cabinet Member for Growth and Planning, Councillor I Bates

I expect to be in a position to consult all of those with an interest in this project in the autumn. The consultation will aim to engage in particular with both local people and potential users and will specifically include access routes to the station on foot and by bicycle, bus, car and taxi. This is particularly important as our aim is for the station to operate as a transport interchange with high quality links to the Busway, local buses, and major cycle routes.

The results of this consultation will then be used to develop the planning application for the station which we aim to submit in the new year. This will be considered by the Joint Development Control Committee, who will themselves consult on the proposals, as part of the normal planning process, before making their decision.

Given the level of interest in the project we have put a plan on our website which shows the various elements that we plan to provide. At this stage this is simply an indicative layout, which can be expected to change as a result of technical work currently taking place with Network Rail who will own and operate the station.

Question from Councillor S van de Ven to the Cabinet Member for Community Engagement, Councillor M McGuire

At present the issuing of a new Blue Badge is a weeks-long process, which presents enormous difficulties for people with a sudden onset of severe disability. What is the Council doing to speed up this process?

Response from the Cabinet Member for Community Engagement, Councillor M McGuire

The new amended legislation on Blue Badges came into effect from the beginning of January 2012. Prior to this, the County Council administered the whole process for its residents. The resulting changes, whilst making the process more robust and addressing the need to bring in more anti fraud prevention initiatives, have resulted in an increase in administration time for local authorities. This, coupled with the 'up to 10 working days' it now takes to get a badge produced by the national badge provider and received by the customer, has added to the time it has been taking to complete the Blue Badge application process.

It has to be acknowledged that the initial period after implementation showed some teething troubles and this was common across the country. On a national level Cambridgeshire has been working closely with the Department of Transport influencing improvements to the process as well as representing all Local Authorities on the national Project Board.
We have been deploying additional staff to reduce the waiting time for a new badge week on week. Officers are now reviewing applications and contacting customers by the next working day with the outcome of their application and, if successful, requesting copies of the necessary supporting documentation. Once all documentation has been returned we have reduced the administration turn around time which includes preparing the photograph and sending the authorisation record to the badge producer, to 5 working days.

We are continuing to respond to feedback given by applicants and have revised our webpages and letters sent out to applicants to make it easier and clearer for our customers to understand the changes in criteria and which supporting documentation, including photographs, will be required.

In response to the difficulties encountered by some of our applicants in adhering to the different charging system introduced by the postal service, we have recently introduced pre-paid reply envelopes for applicants to use when sending us their supporting documentation. This has significantly reduced the number of documents which were posted by applicants but never received by the Council because the wrong value of stamps was used.

The contract with the national badge producer states they will produce the badge, record the badge details on the national database and have the badge delivered to the customer within 10 working days. Our current experience shows badges are now being delivered to applicants within 5 working days of our authorisation being sent.

For applicants who are required to attend an independent medical assessment of their mobility, the current waiting time for the next available appointment can be up to 4 – 5 weeks particularly where applicants can only attend one of the five centres across the County. We are working with the assessment centres to introduce additional appointments and reduce this waiting time.

For those who experience a sudden onset of severe disability, the question for the administrators of the service is how the disability affects their mobility and whether the condition is regarded to be temporary or permanent. A decision on entitlement to a blue badge will be made based on the effect that particular disability or medical condition is having on the person's ability to walk a set distance without pain or breathlessness. Where there are other factors to consider, such as walking at an extremely slow pace or their manner of walking or where the eligibility is not clear, the applicant may be asked to take part in an independent medical assessment for mobility, unless they already automatically qualify as a result of being in receipt of Higher Rate Mobility Component of Disability Living Allowance.

The independent assessors are professional therapists who will assess the actual mobility of the applicant instead of considering only the condition or diagnosis of their disability. The feedback from those who have attended these independent assessments, including those whose application was not successful, shows the majority welcome the focus from the health professionals on their current and future mobility prognosis, with advice being given on how to improve short term and longer term mobility.

As well as working to reduce any backlog of applications and encouraging use of email and online systems where possible in order to speed up the application process, the Contact Centre and Service Transformation teams are carrying out a detailed review of the new Blue Badge service, with to the aim of further improving the customer experience and reducing administration time.

Question from Councillor I Manning to the Cabinet Member for Community Engagement, Councillor M McGuire

Policing & Crime Panels

Policing and Crime Panels are to have two independent members with appropriate expertise, experience etc.

What is the Council doing to co-opt relevant evidence-based criminological expertise for these posts?"

Response from the Cabinet Member for Community Engagement, Councillor M McGuire

The responsibility for appointing co-options rest with Police and Crime Panel (PCP) not Cambridgeshire County Council. The Council's three members of the PCP, including the nominated Liberal Democratic Councillor, will, no doubt, play a full role in discussing options for co-option with other PCP members, including the Liberal Democrat representative from Cambridge City.

The Officers who will be responsible for servicing the Panel, have suggested that co-options will be an item for the first meeting of the Panel when it meets in Shadow form This meeting is likely to take place in August. It will be proposed that Cambridgeshire and Peterborough will follow the Local Government Association guidelines for appointing co-optees.

Question from Councillor B Brooks-Gordon to the Cabinet Member for Community Engagement, Councillor M McGuire

What is the County Council doing to ensure that the 'Independent medical assessment' fairly and accurately takes account of invisible disabilities like Multiple Sclerosis, Lupus, and Diabetes, and a) what is the difference in the cost, and b) were any alternatives to this type of assessment sought?

Response from the Cabinet Member for Community Engagement, Councillor M McGuire

The national Blue Badge Improvement Scheme introduced a number of changes which are contained in the amended legislation, including a requirement for all local authorities to use an independent medical assessment of mobility when considering entitlement to a Blue Badge for those applicants who do not meet the 'automatic entitlement' criteria (for example by already being in receipt of Higher Rate Mobility Component of Disability Living Allowance.)

The independent assessors are professional therapists who, rather than merely considering the condition or diagnosis made, are required to consider the effect of the permanent disability on a person's ability to walk. They will assess whether the applicant is able to walk and if so whether they have considerable difficulty in walking a set distance without pain or breathlessness, as well as the pace and manner in which they are able to walk. They will also take into account the current and future mobility prognosis, with advice being given on how to improve short term and longer term mobility.

The cost of carrying out an independent medical assessment of mobility is the same regardless of whether the applicant has a known disability such as those named above or has been referred for any other reason.

Cambridgeshire has commissioned Cambridgeshire Community Services in the first instance in order to fulfill the national requirement to have independent assessments with the intention of putting to put this out to tender in due course.

It is worth noting that the independent assessments replace the previous practice of obtaining a GP letter to confirm applicants' mobility difficulties. Our resulting experience and feedback from applicants was that in many cases the GP had not actually seen the applicant for several months, particularly where patients are seeing a consultant on a regular basis and so the letter could not confirm the current position against the required criteria. In many cases the GP commented on the general diagnosis rather than its effect on that patient's mobility.